

DD7 McCann Exh 2

EXHIBIT A

Red Flag Criteria

Doctor Shopping – Patient Traveled Abnormal Distance to a Prescriber

- (1) An opioid was dispensed to a patient that traveled for more than 25 miles to visit their prescriber **and** [the patient received at least 1 other opioid prescription from the same prescriber on a different day in any 30-day period **or** the patient received a benzodiazepine or muscle relaxer prescription from the same prescriber, written on the same day as the original opioid prescription].^{1,2}
- (2) An opioid was dispensed to a patient that traveled for more than 25 miles to visit their prescriber **and** the patient received at least 1 other opioid prescription (written by a different prescriber) within 20 days of the original opioid prescription.¹
- (3) An opioid was dispensed to a patient that traveled for more than 25 miles to visit their prescriber and the patient received at least 2 other opioid prescriptions (written by different prescribers) in any 45-day period.¹
- (4) An opioid was dispensed to a patient that received opioids from at least 2 other prescribers in any 45-day period.¹
- (5) An opioid was dispensed to a patient that received opioids from at least 2 other prescribers (such that all the prescribers have different zip codes) in any 60-day period.¹

Pharmacy Shopping – Patient Traveled Abnormal Distance to Pharmacy

- (6) An opioid was dispensed to a patient that traveled for more than 25 miles to visit the pharmacy **and** the patient subsequently received at least 1 other opioid prescription dispensed from at least 1 other pharmacy within 20 days of the original opioid prescription.^{1,2}
- (7) An opioid was dispensed to a patient that traveled for more than 25 miles to visit the pharmacy **and** the patient was dispensed at least 2 other opioid prescriptions (written by any prescribers and dispensed by at least 1 other pharmacy) in any 45-day period.^{1,2}

¹ Plaintiffs allege that once a patient is identified for filling a flagged prescription, every prescription that the patient fills thereafter is subject to flagging to demonstrate that the prescription should not have been dispensed in the absence of due diligence. We have presented both the originally flagged prescription and any prescription subject to flagging as a result of the original prescription.

² Plaintiffs allege that once a prescriber writes a script that is flagged, every prescription that the doctor writes is subject to flagging to demonstrate that the prescription should not have been dispensed in the absence of due diligence. However, in doing so, we assume that the prescriber does not have visibility into the actions of other prescribers. We have presented both the originally flagged prescription and any prescription subject to flagging as a result of the original prescription.

(8) An opioid was dispensed to a patient that had received opioids from at least 1 other pharmacy (such that both pharmacies have different zip codes) in any 45-day period.
^{1, 2}

Pattern Prescribing - Prescriber Writes Same Drug of Same Strength to Multiple Patients

(9) An opioid was dispensed to at least 4 different patients on the same day **and** the opioid prescriptions were for the same drug and strength **and** were written by the same prescriber.^{1, 2}

(10) An opioid was dispensed to at least 3 different patients within an hour **and** the opioid prescriptions were for the same drug and strength **and** were written by the same prescriber.^{1, 2}

(11) An opioid was dispensed on the same day by the same pharmacy to at least 2 different patients from the same zip code that is more than 25 miles away from the pharmacy, **and** the opioid prescriptions were for the same drug and strength (written by any prescriber) **and** were paid by cash.^{1, 2}

(12) An opioid was dispensed on the same day by the same pharmacy to at least 2 different patients from the same zip code that is more than 25 miles away from the pharmacy, **and** the opioid prescriptions were for the same drug and strength **and** were written by the same prescriber.^{1, 2}

Excessive Dispensing – Dispensing Too Frequently or Abnormal Volume

(13) An opioid prescription was refilled (indicated when the number of the fill of the prescription is 2 or more) more than 5 days before the patient's previous prescription should have run out (as indicated by the "days of supply" of the previous prescription). Only the refill is flagged.^{1, 2}

(14) An opioid prescription was filled more than 5 days before the patient's last opioid prescription should have run out **and** the two opioid prescriptions were for the same drug and strength, regardless of the number of dosage units being filled. Only the subsequent prescription is flagged.^{1, 2}

(15) The "days of supply" in any 6-month period for any individual type/dosage of opioid is greater than 210 days (this is done separately for each type/dosage of opioid the patient received, e.g., Oxy 15 and Oxy 30 prescriptions are counted separately).^{1, 2}

(16) A patient was dispensed the same opioid in excess of 90 dosage units at least 2 times in a 20-day period **and** the payment indicates cash or other non-insurance payment for at least one of the prescriptions.^{1, 2}

(17) A patient was dispensed more than 1 immediate-release opioid **and** more than 1 extended-release opioid in a 20-day period. ^{1,2}

Illegitimate Prescribing – Abnormal Quantity, Strength, or Frequency

(18) At least 3 opioid prescriptions of the same drug and strength were written to a patient by the same prescriber on the same day. ^{1,2}

(19) At least 4 opioid prescriptions were written to a patient by the same prescriber over a 45-day period, **and** each prescription was written on a different date within the 45-day period. ^{1,2}

(20) A prescriber wrote opioid prescriptions to at least 2 patients over a 5-day period, and each patient resides in a zip code that is more than 25 miles away from the prescriber. ^{1,2}

(21) A pharmacy filled an opioid prescription written by a prescriber that is a top 5% prescriber (in terms of total dosage units) for any opioid, **and** the specific opioid for which the prescriber is a top 5% prescriber accounts for more than 50% of the total opioid prescriptions issued by the prescriber (measured by volume of dosage units prescribed and regardless of pharmacy dispensing), **and** more than 50% of the patients who received these specific opioid prescriptions paid cash (regardless of pharmacy dispensing). ^{1,2}

Suspicious or Illicit Use – Illegitimate Cocktails or Combinations

(22) An opioid and a [benzodiazepine or muscle relaxer] were dispensed to a patient on the same day (by any pharmacy in the chain) **and** both prescriptions were written by the same prescriber. ^{1,2}

(23) An opioid, a benzodiazepine and a muscle relaxer were dispensed to a patient on the same day (by any pharmacy in the chain) **and** all the prescriptions were written by the same prescriber. ^{1,2}

(24) 3 or more opioid prescriptions were dispensed to a patient on the same day (by any pharmacy in the chain). ^{1,2}

(25) A patient received an opioid and a [benzodiazepine or muscle relaxer] on two separate days within a 30-day period. ^{1,2}

(26) A patient received at least 2 opioid prescriptions and at least 2 [benzodiazepine or muscle relaxer] prescriptions within a 14-day period. ^{1,2}

Multiple Opioids, Cocktails, Combination and Cash Payments

(27) At least 3 opioid prescriptions were dispensed to a patient within a 30-day period (written by any prescriber and filled by any pharmacy); **and** the patient paid cash for each of these prescriptions and had no other non-cash payment transactions for controlled substances during the same 30-day period; **and** this patient had at least 2 [benzodiazepine or muscle relaxer] prescriptions (written by any prescriber and filled by any pharmacy) filled in the same 30-day period.^{1,2}